

[4 May, 2007]

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and its effects on health are extremely difficult as it involves several compounding factors. The group has recommended that there is a need to carry out well controlled studies to assess effect of consumption of carbonated water on health.

Problems faced by Urology patients in the RML Hospital

3292. SHRI SHAHID SIDDIQUI:
SHRI ABU ASIM AZMI:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware that thousands of aged patients suffering from prostate problem have to bank upon only on one senior Urologist in the R.M.L. Hospital who has fixed only one day in a week for these patients and if so, the details thereof;

(b) whether it is a fact that the senior doctor either would not be available on that allotted day or would be late and the patients are attended to by his Junior colleagues who are not the authorized signatories for issue of C.G.H.S. medicines and patients have to wait again for the senior urologist to obtain his signature on the prescriptions; and

(c) if so, what are the reasons therefore and whether Government propose to direct the authority concerned to issue medicines prescribed by the Junior doctors and if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI.PANABAKA LAKSHMI): (a) to (c) The patients of prostate problems are examined by the Senior Urologist every Monday, regularly with the assistance of Senior and Junior residents.

Patients seen by Senior and Junior Residents are counterchecked and the prescription are countersigned by the Senior Urologist.

NACO Programmes on Aids Control

3293. SHRI ABU ASIM AZMI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have taken a final decision for the National AIDS Control Programme in the country;

(b) if so, by when the programme is expected to be initiated to fight HIV/AIDS together with the details thereof, State-wise;

(c) the expected expenditure to be incurred and how much amount would be taken from World Bank, the International Organisations and the country herself; and

(d) how far this programme is expected to control this disease?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) and (b) National AIDS Control Programme was started in 1991. The third phase of National AIDS Control Programme has been prepared and will be implemented during XI Five Year Plan period. The states would be provided with grants-in-aid in keeping with their approved Action Plan, every year.

(c) and (d) The proposed outlay of third phase of National AIDS Control Programme is as follows:

| Source | Amount (Rs. in Crore) |
|--|--------------------------|
| Govt, of India.(Direct Budgetary Support) | 2861 |
| and through integration with National Rural Health Mission | |
| Pooled Funds<World Bank & DFID) | 1933 |
| Global Fund (Round II, III, IV and VI | 1787 |
| UNDP | 71 |
| USAID | 225 |
| Total | 6877 |

The goal of the third phase of the National AIDS Control Programme is to halt and reverse the growth of the HIV epidemic. The model envisages that if 75% of the targets laid down in the Project Implementation Plans are achieved, the number of persons infected with HIV can be brought down to well below 4 million by 2011, with the epidemic gradually tapering down.